





State of Washington Application for a Water Right Permit

SURFACE WATER GROUND WATER Permanent Temporary Short Term

Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE **MINIMUM** FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

Applicant/Business Name:		Phone No: 360-16	Other No: 320-321
Address: 6245 49th lanc A	nu .	500	85 6
City: OLYMPIA		State:	Zip: 98502
Email Address (optional):	ne@ greenerealt	1-com	
Contact Name (if different from above):		Phone No:	Other No:
Relationship to Applicant:			
Address:			
City:		State:	Zip:
Email Address (optional):			
Section 2. STATEMENT	P OF INTENT		
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Section 3. POINT OF DIVERSION OR WITHDRAWAL Complete A or B, and C below A.) If Surface Water Source B.) If Ground Water Source Spring Creek River Lake ☐ Well(s) ☐ Other: Other: SUMMIT LAKE Well diameter & depth: Source Name:_ Number of proposed points of withdrawal: Do you have an existing well? YES NO If available, attach Water Well Report and pump test. Number of proposed diversion points: Do you have an existing diversion? \square YES \square NO Well Tag ID No. C.) Point of Diversion/Withdrawal - Legal Description Parcel No. Section Township County 400003300 Thurston Lot(s) Block(s) Subdivision If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: Feet (North South) and ___ ___feet (East/ West) from the (NW SW NE SE) corner of Section Parcel No. 1/4 Section Township Range County Lot(s) Block(s) Subdivision If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: feet (North/ South) and _ __feet (East/ West) from the (NW SW NE SE) corner of Section NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper. Do you own the land on which the proposed point of diversion/withdrawal is located? XYES NO If no, do you have legal authority to make this application for use of another's land? YES NO Provide the owner name(s), address, and phone number: Section 4. PLACE OF USE Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below attached County Section Twp. Range Parcel No. Do you own all the lands on which the proposed place of use is located? YES NO. If no, do you have legal authority to make this application for use of another's land? YES NO Provide owner name(s), address, and phone number: Are there any other water rights or claims associated with this property or water system? YES NO

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.



If yes, provide the water right and/or claim numbers:

Section 5. WATER SYSTEM DESCRIPTION Describe your proposed water system (include type and size of devices used to divert or withdraw water from 2" black pipermy abot Willest Su goes into cand american Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION Complete A or B, and C below A.) Domestic Water Systems only B.) Municipal Water Systems only (defined under RCW 90.03.015) Projected number of connections to be served: Present population to be served water: Type of connections: rusentonal cubin Estimate future population to be served: _(20 year projection) C.) Water System Planning Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? YES NO __ Water System Number:_ If yes, date plan was approved ___ Name of water system:_ Are you within the service area of an existing water system? YES YO If yes, explain why you are unable to connect to the system:_ Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES Irrigation Total number of acres requested to be irrigated under this application = NOTE: Outline the area to be irrigated on your attached map. Stockwater



List number and kind of stock:

Other Proposed Farm Uses
Describe all proposed uses: _

Is the proposed project for a dairy farm? \(\subseteq \text{YES} \subseteq \text{NO} \)

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

• Acreage irrigated under water rights acquired after December 8, 1977,

• Acreage proposed to be irrigated under this application, and

• Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? YES NO				
Do you have a controlling interest in a Family Farm Development Permit? YES NO If yes, enter Permit No:				
Section 8. OTHER WATER USES				
Hydropower Indicate total feet of head and proposed capacity in kilowatts: Describe works:				
Indicate all uses to which power is to be applied:				
Mining/Industrial Use Describe use, method of supplying and utilizing water:				
Other Use				
Section 9. WATER STORAGE				
Will you be using a dam, dike, or other structure to retain or store water? YES YNO Are you proposing to store more than 10 acre-feet of water? YES YNO Will the water depth be 10 feet or more? YES YOO If you answered yes to any of the above questions, please describe:				
NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest poin and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.				
Section 10. DRIVING DIRECTIONS				
Provide detailed driving directions to the project site: # West on Hwy 8 to Znd Summit lake exit - take right - Left on Summittake Shove ld Nw to home on right.				
Site Address: 2727 Symmit Lakeshere W NW				



Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Print Name (Applicant or authorized representative)	Signature	06/26/27 Date
Print Name (Landowner of Place of Use)	Signature	Date
Print Name (Landowner of Place of Use)	Signature	Date
Print Name (Landowner of Place of Use)	Signature	Date

Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 5128

LACEY WA 98509-5128

Please check the region in which your proposed project is located.

Southwest Northwest Central Eastern

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



Southwest Regional Office: 360-407-6300 Northwest Regional Office: 425-649-7000 Central Regional Office: 509-575-2490 Eastern Regional Office: 509-329-3400

